



MANAGER'S PREVIOUS RESIDENCE ADDRESSES WITHIN THE LAST TEN YEARS:

---

(Street	City	State	Zip Code)	From	To
---------	------	-------	-----------	------	----

---

(Street	City	State	Zip Code)	From	To
---------	------	-------	-----------	------	----

---

(Street	City	State	Zip Code)	From	To
---------	------	-------	-----------	------	----

MANAGER'S CURRENT OR PREVIOUS BUSINESS ADDRESSES WITHIN THE LAST TEN YEARS:

---

(Name of Business	Address	From	To
-------------------	---------	------	----

---

(Name of Business	Address	From	To
-------------------	---------	------	----

---

(Name of Business	Address	From	To
-------------------	---------	------	----

NAME, ADDRESS AND NATURE OF BUSINESS FOR WHICH APPLICATION IS DESIRED:

---

---

---

---

NAME AND ADDRESS OF OWNER OR OWNERS OF BUSINESS FOR WHICH LICENSE IS DESIRED:

---

---

---

HAS APPLICANT OR MANAGER AT ANY PREVIOUS TIME **APPLIED** TO A GOVERNMENTAL ENTITY FOR AN ALCOHOLIC BEVERAGE LICENSE? (NO)\_\_\_\_\_ (YES)\_\_\_\_\_ IF SO, PLEASE PROVIDE DETAILS AS TO THE GOVERNMENTAL ENTITY APPLIED WITH AND THE CURRENT STATUS OF THAT APPLICATION\_\_\_\_\_

---

---

---

HAS APPLICANT OR MANAGER EVER HELD AN ALCOHOLIC BEVERAGE LICENSE ISSUED BY ANY GOVERNMENTAL ENTITY? (NO)\_\_\_\_\_ (YES)\_\_\_\_\_ IF SO, PLEASE PROVIDE DETAILS AS TO THE CIRCUMSTANCES OF THAT LICENSE AND THE PRESENT STATUS OF SUCH LICENSE.

---

---

---

---

HAS APPLICANT OR MANAGER EVER HELD AN ALCOHOLIC BEVERAGE LICENSE ISSUED BY ANY GOVERNMENTAL ENTITY WHICH HAS BEEN SUSPENDED OR REVOKED? (NO)\_\_\_\_\_ (YES)\_\_\_\_\_ IF SO, PLEASE PROVIDE DETAILS AS TO THE CIRCUMSTANCES THEREOF

---

---

---

HAS APPLICANT OR MANAGER EVER BEEN CONVICTED OF, ENTERED A PLEA OR NOLO CONTENDERE TO, OR FORFEITED A BOND ON, ANY CRIME OTHER THAN TRAFFIC VIOLATIONS? (NO)\_\_\_\_\_ (YES)\_\_\_\_\_ IF SO, PLEASE PROVIDE DETAILS AS TO THE NATURE AND CIRCUMSTANCES THEREOF\_\_\_\_\_

---

---

---

WILL APPLICANT OR MANAGER BE EITHER DIRECTLY OR INDIRECTLY INTERESTED IN THE PROFITS OR LOSSES OF THE BUSINESS IN WHICH THE LICENSE APPLIED FOR WILL BE UTILIZED? (NO)\_\_\_\_\_ (YES)\_\_\_\_\_ IF SO, PLEASE PROVIDE DETAILS AS TO THE CIRCUMSTANCES THEREOF\_\_\_\_\_

---

---

---

TYPE OF LICENSE DESIRED:

- (1) WHOLESALE MALT BEVERAGE LICENSE \_\_\_\_\_
- (2) RETAIL MALT BEVERAGE PACKAGE LICENSE \_\_\_\_\_
- (3) RETAIL MALT BEVERAGE CONSUMPTION LICENSE \_\_\_\_\_
- (4) WHOLESALE WINE LICENSE \_\_\_\_\_
- (5) RETAIL WINE PACKAGE LICENSE \_\_\_\_\_
- (6) RETAIL WINE CONSUMPTION LICENSE \_\_\_\_\_
- (7) RETAIL DISTILLED SPIRITS CONSUMPTION LICENSE \_\_\_\_\_

THE APPLICANT HEREBY AGREES THAT HE/SHE, ALONG WITH THE MANAGER, IS FULLY QUALIFIED IN ALL RESPECTS TO BE THE HOLDER OF AN ALCOHOLIC BEVERAGE LICENSE ISSUED BY THE CITY OF ADEL AND THAT SUCH APPLICANT AND MANAGER IS ENTITLED TO HAVE THE LICENSE REQUESTED ISSUED IN ACCORDANCE WITH THE ALCOHOL ORDINANCE OF THE CITY OF ADEL. APPLICANT FURTHER AGREES THAT THE LOCATION WITH RESPECT TO WHICH THE LICENSE IS SOUGHT MEETS ALL CONDITIONS, QUALIFICATIONS AND CRITERIA ESTABLISHED FOR THE LOCATION OF A BUSINESS UTILIZING THE ALCOHOLIC BEVERAGE LICENSE APPLIED FOR.

THE APPLICANT AND MANAGER HEREBY PROVIDES WRITTEN CONSENT THAT THE CITY OF ADEL HAS THE CONTINUING PERMISSION AND AUTHORITY TO MONITOR THE PUBLIC RECORDS OF THE CITY, COUNTY, THE STATE AND OF THE UNITED STATES TO ENSURE ON-GOING COMPLIANCE WITH THE STATEMENTS SET FORTH IN THIS APPLICATION. ANY LICENSE GRANTED UPON AN APPLICATION THAT DOES NOT CONTAIN SUCH WRITTEN CONSENT SHALL AUTOMATICALLY EXPIRE AT MIDNIGHT ON DECEMBER 31 OF THE YEAR IN WHICH ISSUED. SUCH LICENSE CANNOT BE RENEWED UNDER THE PROVISION OF SECTIONS 6-77 AND 6-79 OF THE ALCOHOL ORDINANCE OF THE CITY OF ADEL. RATHER, THE CITY SHALL TREAT THE REQUEST FOR RENEWAL FOR SUCH LICENSE AS AN APPLICATION FOR A NEW LICENSE UNDER SECTION 6-66.

\_\_\_\_\_  
APPLICANT

\_\_\_\_\_  
MANAGER

I DO SOLEMNLY SWEAR THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I FURTHER SWEAR THAT, IN THE EVENT THIS APPLICATION IS APPROVED AND A LICENSE ISSUED TO ME, I WILL AT ALL TIMES COMPLY WITH ALL THE PROVISIONS OF THE ORDINANCE OF THE CITY OF ADEL FOR THE REGULATION OF BEER, WINE AND DISTILLED SPIRITS AND I WILL AT ALL TIMES COMPLY WITH THE LAWS OF THE STATE OF GEORGIA REGULATING THE SALES OF BEER, WINE AND DISTILLED SPIRITS. I FURTHER UNDERSTAND AND ACKNOWLEDGE THAT ANY VIOLATION OF SAID ORDINANCE BY ME OR ANY EMPLOYEE OF MINE SHALL RESULT IN DISCIPLINARY ACTION UP TO AND INCLUDING REVOCATION OF MY LICENSE.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT

ATTEST:

SWORN TO AND SUBSCRIBED  
BEFORE ME THIS \_\_\_\_\_, DAY  
OF \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC OR CITY CLERK

**ADDITIONAL REQUIREMENTS:**

- (1) A COMPLETE SET OF FINGERPRINTS WITH RESPONSE INFORMATION OF THE APPLICANT AND MANAGER ADMINISTERED BY THE COOK COUNTY SHERIFF'S DEPARTMENT UPON PROPER PAYMENT OF ALL FEES.**
  
- (2) A HEAD AND SHOULDER PHOTOGRAPH OF THE APPLICANT AND MANAGER, SUCH AS IS CONTAINED ON A STATE DRIVER'S LICENSE, TAKEN WITHIN THE PAST THREE YEARS SHALL BE PROVIDED UPON SUBMITTAL OF THE APPLICATION.**